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UTILITY PATENT APPLICATION TRANSMITTAL

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Attorney Docket No.	DEP754NP
First Inventor	AUGER, DANIEL D.
Title	KIT, GUIDE & METHOD FOR LOCATING DISTAL FEMORAL RESECTION PLANE
Everen Mail Label No.	

TRANSMITTAL	Title		RESECTION PL	ANE			
(only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.		EU560708360US				
APPLICATION ELEMENTS		ADD	RESS TO:	Commissioner for Patents			
	dication			Box Patent Application			
See MPEP Chapter 600 concerning utility patent application contents.			Washington, DC 20231				
1. X Fee Transmittal Form (e.g., PTC	/SB/17)	7. CD-ROM or CD-R in duplicate, large table or					
(submit an original and a duplicate for fee p		Computer Program (Appendix)					
2. Applicant claims small entity stat	us.	l ₋			9		
3. Specification [Total Pages 42]				/or Amino Acid Sequence	PTO		
(Preferred arrangement set forth below) - Descriptive Title of the Invention				f applicable, all necessary)	0.S.		
- Cross Reference to Related Applica	ations	a. Computer Readable Form (CRF) b. Specification Sequence Listing on:					
- Statement Regarding Fed sponsore		i. CD-ROM or CD-R (2 copies); or					
- Reference to sequence listing, a tal		i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper					
computer program listing appendix				ying identity of above copies	219		
- Background of the Invention							
 Brief Summary of the Invention Brief Description of the Drawings (ii 	f filed)	1		YING APPLICATION PART	Š		
- Detailed Description	mea)			Papers (cover sheet & document(s)) (b) Statement Power of Atto	ornov		
- Claim(s)		10. ['s an assignee)	лпеу		
- Abstract of the Disclosure		111.□		slation Document (if applicable)			
				Disclosure Statement			
4. ⊠ Drawing(s)(35 USC 113) [Total	Sheets 10]		(IDS)/PTO-14	49 ☐Copies of IDS Cita	ations		
	Pages 4]		Preliminary A				
a. 🔲 Newly executed (original or copy	/)	14.⊵		pt Postcard (MPEP 503)			
b. Copy from a prior application (37	CFR 1.63(d))	(Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s)					
(for continuation/divisional with Box 16 c. ⊠ Unexecuted (original or copy)	s completea)	13.		rity is claimed)			
i. DELETION OF INVENTOR	S)	16. [Certifications under 35 U.S.C.	122		
Signed statement attached deleting				Applicant must attach form			
inventor(s) named in the price		, , ,		or its equivalent.			
see 37 CFR 1.63(d)(2) and 7	1.33(b).	17. L	Other				
6. Application Data Sheet. See 37	CFR 1.76						
18. If a CONTINUING APPLICATION, chec	k appropriate bo	x and s	upply the requis	ite information below and in a			
preliminary amendment, or in an Applica				a Na			
☐ Continuation ☐ Divisional ☐ Continu Prior application information: Examiner		Art U		on No.: , filed .			
For CONTINUATION or DIVISIONAL APP				prior application, from which an			
oath or declaration is supplied under Box 5	b, is considere	d a par	rt of the disclos	sure of the accompanying			
continuation or divisional application and is	hereby incorp	orated	by reference.	The incorporation <u>can only</u> be			
relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS							
19. C ⊠ Customer Number or Bar Code Label				e Address below			
Name: Philip S. Johnson, Esq.	000021111	<u> О. </u>	Jonespondene	C / (ddi CGC DCIOW			
Address: Johnson & Johnson							
One Johnson & Johnson Plaza							
New Brunswick, NJ 089		SA					
20.	TELEPHON						
Please direct all telephone calls or telefaxes to Stephen J. Manich at:							
Telephone: (574) 372-7796 Fax: (574) 372-7596							
21. SIGNĄTĮÚRE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
NAME Stephen J. Manich	NAME Stephen J. Manich Reg. No. 30,657						
SIGNATURE STEPHEN	-Mer	n'	L				
DATE June 27 2003	//						

FEE TRANSMITTAL

Com	plete if Known
Application Number	
Filing Date	
First Named Inventor	AUGER, DANIEL D.
Group Art Unit	
Examiner Name	
Attorney Docket Number	DEP754

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$750.00
TOTAL CLAIMS	26 - 20 =	6	x 18.00	\$108.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 84.00	\$
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
			TOTAL FEES	\$858.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/DEP754/SJM in the amount of \$858.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/DEP754/SJM. Three copies of this sheet are enclosed.

SUBMITTED B	Y:	Complete (if applicable)
Typed or		
Printed Name	STEPHEN J. MANICH	Reg. No. 30,657
Signature	Stephen Date: June 27, 2003	Deposit Account No. 10-0750

DOCKET NO. DEP754NP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: DANIEL D. AUGER

: KIT, GUIDE & METHOD FOR LOCATING DISTAL FEMORAL For

RESECTION PLANE

Express Mail Certificate

"Express Mail" mailing number: EU560708360US

Date of Deposit:

June 27, 2003

I hereby certify that this complete application, including specification pages, claims, formal drawings, Declaration and Power of Attorney, and Assignment, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Post Office Box 1450, Alexandria, VA 22313-1450.

Nancy J. Williams (Typed or printed name of person mailing paper or fee)